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REPORT OF THE COMMISSION ON ITS TWENTY-SIXTH SESSION

Draft report

Addendum

Rapporteur: J. A. MWANIKI (Kenya)

Chapter ____. TECHNICAL COOPERATION

B. National Household Survey Capability Programme

1. The Commission considered item 11 (b) of its agenda at its 445th meeting on 8 February 1991. It had before it the report of the Secretary-General on progress in implementation and co-ordination of the National Household Survey Capability Programme (E/CN.3/1991/26).

2. The Commission noted with appreciation that the report was informative and of high quality.

3. The Commission expressed appreciation for the accomplishments of the National Household Survey Capability Programme (NHSCP), recognizing its dynamism, its effectiveness in promoting household surveys in developing countries, its role in mobilizing technical and other support for country survey programmes, the importance of household surveys as a tool in the collection of a wide range of basic economic, social and demographic statistics and the benefits that have been realized by countries that have participated in the Programme.

4. The Commission considered that the technical studies produced and the training workshops carried out by NHSCP were relevant and of high quality and standard. It noted that further technical research studies on methodology were a continuing need in the field of household surveys and urged that NHSCP continue that important activity and make its reports widely available. In that regard, the Commission noted the progress made in the preparation of the manual on collecting literacy data through household surveys. The Commission was aware of the fact that several countries, while not formally participating in NHSCP, had been using the NHSCP technical studies and methodological guidelines. In a few cases, countries had even established integrated and coordinated household survey programmes as promoted by NHSCP using their own resources.

5. The Commission also considered that the regional commissions had made significant contributions to NHSCP, citing the importance of regional advisers and regional workshops and training efforts. Further, the Commission expressed its appreciation for the ongoing provision of advisory services by the International Labour Organisation (ILO) in the region covered by the Economic Commission for Africa (ECA) and welcomed the continuation of its advisory services in the region covered by the Economic and Social Commission for Asia and the Pacific (ESCAP), where the ILO adviser devoted 80 per cent of his time to NHSCP activities. In contrast, the Commission expressed its concern at the situation in the region covered by the Economic Comission for Latin America and the Caribbean (ECLAC), where there was currently no regional adviser owing to a shortage of funds. It was also agreed that there was a strong need for the continuation of the NHSCP training programme in New Delhi. The contributions made towards training at the Statistical Institute for Asia and the Pacific (SIAP) by ESCAP and by the NHSCP technical advisers were also appreciated and encouraged to continue.

6. The Commission noted with appreciation that NHSCP continued to accommodate the sectoral concerns of the specialized agencies, such as ILO, the Food and Agriculture Organization of the United Nations, the World Health Organization and the United Nations Educational, Scientific and Cultural Organization, in national household survey programmes organized with its technical support. The Commission urged the continuation of the collaborative efforts of NHSCP with other specialized agencies, especially in the development of technical studies and national capabilities through training workshops.

7. The Commission stressed the importance of the evaluations of country programmes that have been conducted for NHSCP and urged that such evaluations be undertaken for many other countries.

8. The Commission was of the view that NHSCP had ably demonstrated itself as a model in technical cooperation arrangements and that consideration should be given to establishing a similar programme for the collection of establishment-based statistics using NHSCP as a prototype.

9. The Commission expressed its strong support for the continuation of NHSCP after the end of 1991. It noted in particular that (a) many countries that have recently joined NHSCP would require technical co-operation support and other inputs over the next several years, (b) another 23 countries that had already prepared

project proposals were in various stages of entry into NHSCP and would need to be supported, (c) many other countries in the developing regions have expressed interest in joining NHSCP, and (d) a number of countries have recently conducted population consensus, or were in the process of doing so, and that essential resource should be exploited in the context of NHSCP for the development of household sampling frames. In view of the continuing needs and the proven effectiveness of the programme, the Commission stressed the importance of continuing the Programme, including its global and regional components.

10. Accordingly, the Commission welcomed the discussions currently ongoing with the United Nations Children's Fund (UNICEF) for continuation of support after 1991 and the intention of the United Nations Population Fund (UNFPA) to continue its support for NHSCP beyond 1991, both at the country and the global level. It also took note of the UNFPA plan to develop a socio-cultural and demographic survey programme in Africa, which would be implemented under the umbrella of NHSCP with arrangements for technical cooperation similar to those for the Pan Arab Project for Child Development (PAPCHILD), and the proposed support of UNFPA for an interregional programme for research after 1991. The Commission welcomed the indication of support from the Government of the United Kingdom for household survey programmes in countries participating in NHSCP, particularly in the context of their training needs.

11. The Commission noted that the United Nations Development Programme (UNDP) had provided support for the global component of NHSCP in recent years on the understanding that the Department of Technical Co-operation for Development of the United Nations Secretariat would assume responsibility for the Central Co-ordinating Unit of NHSCP as of 1992. However, as noted in the Commission's discussion of agenda item 11 (a), new developments have occurred in response to General Assembly resolution 44/211 on national execution and Governing Council resolution 90/37 on agency support costs which might substantially reduce the resources available to the Department to support this and other activities. The Commission was informed that the Department was currently holding discussions with UNDP and UNFPA on the new support costs arrangements, but the final outcome of those discussions was not at all certain.

12. Despite those uncertainties, the Commission attached the highest priority to finding ways to continue the essential support for NHSCP. All possible avenues of support should be utilized, including resources made available under the new agency support costs arrangements, the regular budget of the United Nations and any other arrangements that can be developed.

Action taken by the Commission

13. The Commission:

(a) Commended NHSCP as a model programme of technical cooperation that was both dynamic and effective in providing assistance and support for developing countries;

(b) Urged multilateral and bilateral organizations to continue to support country projects and programmes designed to strengthen national survey-taking capabilities and carried out under the umbrella of NHSCP;

(c) Strongly recommended the extension of NHSCP beyond 1991 and urged that all possible avenues of support for its activities at the global and regional levels be utilized, including resources made available under the new agency support costs arrangments, the regular budget of the United Nations and any other arrangements that can be developed;

(d) Recognized with appreciation the supportive role played by the regional commissions and urged the strengthening of the regional advisory services in household surveys;

(e) In the context of household surveys, supported the need for continuous development of technical studies, training and interregional workshops and general technical assistance on methods and techniques.